

## **Massachusetts Hospital Association Claims Update**

**July 17, 2008**

### **Eligibility:**

**Issue:** The Division of Health Care Finance and Policy identified Health Safety Net (HSN) claims that were initially denied as failing eligibility but have now been determined as being eligible on the date of service.

**Resolution:** The Division will process each of these claims internally where they will appear on July's monthly remit or denial report (if further denials were the result of an error code outside of eligibility). Moving forward, providers who, after thoroughly researching their eligibility denied claims believe that the individual was eligible on the date of service, may contact the Division's Help Desk at (800) 609-7232 or via email at [dhcfphelpdesk@state.ma.us](mailto:dhcfphelpdesk@state.ma.us).

### **Transaction Control Number (TCN):**

**Issue:** Providers requesting information on the submission of TCNs in an 837-I that were previously submitted in denied UB claims.

**Resolution:** Pursuant to feedback received regarding the transition to 837-I claim submissions and the mismatch of TCNs; the Division has implemented the following submission alternatives. Providers may continue to work on old UB claims after their transition to 837-I and can resubmit these old UB claims via the submission of a replacement claim. Replacements and voids would be the only UB claim submissions allowed after a provider's transition to the 837-I. Providers may also submit their old UB claims in the 837-I format; however, providers must ensure that the TCNs on the 837-I and initial UB claim are the same. All new submissions that occur after a provider's transition to the 837-I must be submitted in the 837-I format only.

### **Free Care / Special Circumstances Application:**

Effective immediately, applications for deceased patients should no longer be submitted to the Division through the Free Care or Special Circumstances applications. This decision was made based upon discussions between the Division and MassHealth where MassHealth has a system for processing applications for deceased patients. Medical expenses leading up to the death of an eligible individual are billable as long as the application is submitted within 10 days (for patients under 65 years of age) or 90 days (for patients 65 and over) of the patient's death. Please contact MassHealth at (800) 841-2900 for further information regarding applications for deceased patients.

### **Claims Research:**

The Division would like to remind providers that it is the provider's responsibility to research denied claims, ensure that the denial was not correct or was not the result of a provider billing error. Claims should only be submitted to the Division after the provider has thoroughly reviewed them and are unable to determine the cause for denial. Examples of claim denials that should not be submitted to the Division include:

- Data entry error where the wrong SSN / ZZ number is entered.
- Redeterminations made after the claim submission where the provider should check REVS, upon receiving a denial, to verify eligibility.

Providers with any questions regarding this matter can contact the Division's Help Desk at (800)609-7232 or [dhcfphelpdesk@state.ma.us](mailto:dhcfphelpdesk@state.ma.us).